

## APPLICATION FOR CHARACTER AND IDENTIFICATION CLEARANCE INSTRUCTIONS AND INFORMATION

<b>READ THE INSTRUCTIONS FULLY BEFORE COMPLETING THE APPLICATION.</b>
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To apply for a Certificate of Clearance and/or a first credential you must submit *all* of the following:

- ☐ 1. Application Form (41-CIC) and fee of \$35.00\* (if applying for only Certificate of Clearance)
- ☐ 2. Application Form (41-4) and fee of \$70.00\* (if applying for first credential)
- ☐ 3. Two fingerprint cards
- ☐ 4. Fingerprint fee of \$56.00\* (FBI fingerprint fee of \$24.00\* and DOJ fee of \$32.00\*)  
The total fee for a Certificate of Clearance only is \$91.00\*. The total fee for a first credential is \$126. (Note that fees are subject to change; please see form CL-659 for current fees.)

Applications not completely and accurately filled in and accompanied by all required supporting materials will be returned to the sender for completion.

### SECTION 1: PERSONAL INFORMATION

Type or print, using black ink, all information required on the application. Use your full legal name. You must also list all former names, including your maiden name. If your address changes before you get your document, be sure to notify us in writing of the change and include your full name and social security number on the correspondence. Fill in your sex, height, weight, and eye and hair color. This information should be identical to the information provided on the fingerprint cards.

### SECTION 2: CHARACTER AND FITNESS

Read the questions carefully before you answer them. If you answer "yes" to any question, you must submit a full explanation and your application will be referred to staff working with the Committee of Credentials for evaluation of your fitness to teach, or fitness or competence to perform other duties which would be authorized by the credential.

**Note:** Information you provide is subject to investigation of your moral character and true identity by means of review of information, reports, records, and other data from any agency or department of the state or any political subdivision of the state, whether chartered or not, when secured by the Commission for such purposes.

### SECTION 3: OATH, AFFIDAVIT AND RELEASE

California law requires every person applying for a certificate to complete the "Oath and Affidavit," without alteration, and sign his or her full legal name as printed at the top of page 1 of this application. If you do not sign the "Oath and Affidavit," as stated, your application may be rejected or denied.

## ADDITIONAL INFORMATION

### FEES

Attach a CERTIFIED CHECK OR MONEYORDER for the total amount shown on the front of the application. A personal check is acceptable if you are mailing the application directly to us. Be sure to include the required fees for all applications and fingerprint cards. Make checks payable to the *Commission on Teacher Credentialing*. If you are applying through a college or university, county office of education, or school district office, you might be asked to make the check payable to that *agency* so that they can submit a single check to us for all of their applicants. The application fee is considered earned when the application is received and is not refundable. A service charge will be assessed for a check which does not clear the bank. The credential application and fee remain valid for one year provided all requirements for the credential were completed on or prior to the date of application. Fees are subject to change.

### INSTRUCTIONS FOR SUBMITTING FINGERPRINT CARDS

Fingerprint cards are required. Fingerprint cards may also be required if a credential has expired, been revoked or an application was denied, rejected or withdrawn.

Your fingerprints may be taken by a local, county, state or federal law enforcement officer, or by the district, county, or college office of education if they provide the service. ***Do not bend or fold the cards.*** Use standard three-letter abbreviations for your physical description: BLK=black, BRN=brown, BLD=blond, GRY=gray, BLU=blue, GRN=green, HZL=hazel, etc. Your name and signature on the fingerprint cards must be the same as you write them on this application form. There is a fee for the processing of fingerprint cards through the California Department of Justice and the FBI. See page 1 for the fee required for fingerprint card processing. Include that amount when you calculate the total amount of your check.

Your fingerprint cards are forwarded to the California Department of Justice and the FBI for processing. Processing generally takes three to six months. If your application is returned to you at any point in the processing, you will need to follow the directions included and resubmit the application in a timely manner.

### PROCESSING TIME

California Code of Regulations, Title 5, Section 80443, sets a maximum processing time for completed applications. Applications delayed by a Commission appeal, Professional Practices review, or fingerprint card processing are not subject to the 75-day restriction. Applicants not notified of their credential status within 75 working days after the Commission received the application have the right to file an appeal, in writing, with the Executive Director of the Commission for a refund of the filing fee. The Commission may deny the refund request if the Commission's application workload exceeds by 15% the number of applications processed in the same quarter of the previous year, or if other statutory mandates cause an unforeseeable delay in application processing.

If you would like notice that your application has been received by the Commission, request a return receipt through the Post Office when you mail the application packet.

If you need additional information, write to the Commission on Teacher Credentialing, Box 944270, Sacramento, CA 94244-2700 or call (916) 445-7254. Additional application forms and information are also available at county offices of education, school district offices, and in the education offices of colleges and universities.

## CRIMINAL CONVICTION INFORMATION

### When Do You Have to Disclose a Criminal Conviction?

You are required to disclose *all* criminal convictions. A court order pursuant to Penal Code Section 1203.4(a) states that the order does not relieve the person of the obligation to disclose the conviction in response to any direct question contained in any questionnaire or application for public office or for licensure by any state or local agency. *Therefore, you must disclose the conviction even if you have obtained an order pursuant to Penal Code Section 1203.4.*

A plea of *nolo contendere* to a criminal charge results in a conviction which must be disclosed.

Failure to report a conviction or disciplinary action by a state licensing agency is considered falsification of your application and is grounds for denial of your application.

### Do Some Offenses Result in Mandatory Denial or Revocation of Credentials?

Certain types of offenses are conclusively presumed to involve moral turpitude and to be related to an applicant's fitness or competence to perform certificated services. The Commission is prohibited by law from issuing any credential to a person who has been convicted of any sex offense defined under Education Code Section 44010 or of any narcotics offense defined under Education Code Section 44011, or who has been judicially determined to be a mentally disordered sex offender under any applicable law.

A list of the specific offenses listed in Sections 44010, 44011, and 44424 of the Education Code can be obtained by calling the Division of Professional Practices of the Commission at (916) 445-0243. When reporting conviction or disciplinary action, the applicant is required to make a full written explanation of: the underlying circumstances, the date of the incident(s), date of conviction(s) or disciplinary action, specific section of law violated (cite section of law if convicted), court location, sanctions or penalties imposed by the court or licensing agency, and the name and address of the investigating authority.

To make a determination in these cases, the Commission and the Committee of Credentials consider the nature and severity of the offense, its relationship to teaching, recency of the acts or crimes, compliance with court sanctions, and any evidence of rehabilitation.

The burden of proof lies with the applicant to demonstrate acceptable, documented evidence of rehabilitation. Examples of such rehabilitative evidence include:

- recent, dated letter from applicant describing rehabilitative efforts or changes in life to prevent future problems;
- letters on official letterhead from professional counselors, instructors, employers, probation or parole officers;
- letters from recognized recovery programs and/or counselors attesting to current sobriety and length of time of sobriety, if there is a history of alcohol or drug abuse;
- proof of community work, schooling, or other self-improvement efforts;
- certified court order expunging record or certificate of rehabilitation;
- current mental status examination by a clinical psychologist, including psychological testing, if applicable.

## INFORMATION COLLECTION AND ACCESS

*The Information Practices Act of 1977* provides that agencies requesting information indicate the principal purposes for which that information is used. Your name, former names, date of birth and social security number are used to provide proper identification for the processing of your

application. Your Social Security number may also be used for purposes of compliance with any court order or judgment for family support in accordance with section 11350.6 of the Welfare and Institutions Code. Other information is used to determine your eligibility. All such information is personal and may be disclosed to the public only with your permission or in accordance with the law. The information requested is mandatory and necessary for our agency to perform its duty under Education Code Sections 44200-44439, which authorize this work. If not furnished, your application may be denied, delayed, or returned for completion. You have a right to review personal information maintained on you by our agency unless access is exempted by law. The Director of the Certification, Assignment and Waivers Division of the Commission on Teacher Credentialing, 1812 9th Street, Sacramento, California 95814-7000, (916) 445-7254, is responsible for the maintenance of this information.

Mail to:  
STATE OF CALIFORNIA  
COMMISSION ON TEACHER CREDENTIALING  
BOX 944270, (1812 9th Street)  
SACRAMENTO, CALIFORNIA 94244-2700

# APPLICATION FOR CHARACTER AND IDENTIFICATION CLEARANCE

(For Privacy Act Notification see Instructions)

Commission Use Only: Fee Information		
App	FP	<div>County/District/Institution Use Only:</div> <div>Filing Date:</div> <div>Fee Stamp</div>

## SECTION 1. PERSONAL INFORMATION

(PLEASE PRINT OR TYPE USING BLACK INK)

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth \_\_\_\_\_

Applicant's Full  
Legal Name: \_\_\_\_\_ Home Phone (      ) \_\_\_\_\_  
First Middle and/or Maiden Last Area Code

Mailing Address: \_\_\_\_\_ Work Phone ( \_\_\_\_\_ ) \_\_\_\_\_  
 \_\_\_\_\_ Street or P.O. Box Number  
 \_\_\_\_\_ Area Code

City	State	Zip Code	Sex	Hgt	Wgt	Eyes	Hair
San Francisco	California	94102	M	70	170	Blue	Brown
San Francisco	California	94102	F	60	120	Blue	Blond
San Francisco	California	94102	M	70	170	Blue	Brown
San Francisco	California	94102	F	60	120	Blue	Blond
San Francisco	California	94102	M	70	170	Blue	Brown
San Francisco	California	94102	F	60	120	Blue	Blond
San Francisco	California	94102	M	70	170	Blue	Brown
San Francisco	California	94102	F	60	120	Blue	Blond
San Francisco	California	94102	M	70	170	Blue	Brown
San Francisco	California	94102	F	60	120	Blue	Blond

Former Name(s): \_\_\_\_\_ Current California County of Public School Employment \_\_\_\_\_  
(Including First, Last or Maiden)

## SECTION 2. CHARACTER AND FITNESS

Answer each question by checking "yes" or "no" whichever is true. If you answer "yes" to any question, please attach a full explanation of your answer.

	YES	NO
1. Have you ever held a Certificate of Clearance or a California credential or permit authorizing teaching or service in California public schools?	<input type="checkbox"/>	<input type="checkbox"/>
2. Have you ever held a credential or license authorizing service in the public schools in another state?	<input type="checkbox"/>	<input type="checkbox"/>

If you answer "yes" you must complete the "Verification of Good Standing" form and return it with this application.

3. Have you ever been convicted of any felony or misdemeanor offense, including entering a plea of nolo contendere, in California or in any other state or place? ☐ ☐

If you answer "yes" you must complete the "Criminal Conviction" form for each conviction and return it with this application.

4. Do you have any mental or physical disability or communicable or contagious disease which would prevent you from teaching or performing other certified services? ☐ ☐

- |  | YES                      | NO                       |
|--|--------------------------|--------------------------|
| 5. Are you addicted to the use of intoxicating beverages?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Are you addicted to the use of any narcotics or drugs?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Have you ever had <i>any credential</i> including but not limited to any Certificate of Clearance, permit, credential, license, or other document authorizing public school service or teaching, suspended, revoked, voided, denied and/or otherwise rejected for cause in California or any other state or place?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Have you ever had <i>any application</i> for a credential, including but not limited to any Certificate of Clearance, permit, credential, license or other document authorizing public school service or teaching denied and/or rejected for cause in California or any other state or place?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Have you been dismissed, resigned from, entered into a settlement agreement, or otherwise left school employment to avoid investigation for alleged misconduct and/or dismissal in California or any other state or place?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Are you now the subject of any inquiry, review or investigation by a teacher licensing agency in connection with any alleged misconduct; is any disciplinary action now pending against you in any school district or before any teacher licensing agency or court in California or any other state; is any adverse action now pending against any credential you hold, including but not limited to any Certificate of Clearance, permit, credential, license or other document authorizing public school service or teaching, before any teacher licensing agency or court in California or any other state? | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Do you currently have any outstanding criminal charges pending against you in California or in any state or place?<br><b>If you answer "yes" you must complete the "Criminal Conviction" form for each pending criminal charge and return it with this application.</b>  | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Have you ever had any disciplinary action, (including an action which was stayed by the licensing agency) taken against any professional or vocational license in California or any other state or place?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. If you are applying through a college to student teach or for other supervised practice complete the following:  |                          |                          |

Name of College or University \_\_\_\_\_

Address \_\_\_\_\_ First day of student teaching \_\_\_\_\_  
Day Month Year

### SECTION 3. OATH, AFFIDAVIT AND RELEASE

I solemnly swear (or affirm) that I will support the Constitution of the United States of America, the Constitution of the State of California, and the laws of the United States and the State of California. I hereby certify (or declare) under penalty of perjury that all the foregoing statements in this application are true and correct.

By signing this form I consent to the release of information to the Commission for the purpose of ascertaining my moral character and true identity, pursuant to Education Code §44341.

Date \_\_\_\_\_ City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_  
Month Day Year

**SIGNATURE** \_\_\_\_\_

Sign your full name as printed at the top of page 1

COMMISSION USE ONLY - - - - DO NOT WRITE BELOW THIS LINE

**ACTION**

☐ Grant    ☐ Deny    ☐ Reject  
☐ Special Committee Action

**DIRECTIONS**

☐ DO NOT PRINT C/C  
☐ DO NOT MAIL C/C

**BASIS**

☐ Direct Application  
☐ IHE Recommendation

CASHIERING REJECT    Initials \_\_\_\_\_ Date \_\_\_\_\_

F P CARD PREVIOUSLY SUBMITTED    ☐ YES    ☐ REPRINT    ☐ NO

FBI/DOJ CARDS sent to BID \_\_\_\_\_  
Date/Initial

DOJ CLEAR/RAP \_\_\_\_\_  
Date/Initial

**DPP ACTION**

FBI CLEAR/RAP \_\_\_\_\_  
Date/Initial

App Pack Reject \_\_\_\_\_  
Date/Initial

CC Reject Mailed \_\_\_\_\_  
Date/Initial

**COMMITTEE OF CREDENTIALS ACTION**

CC Grant \_\_\_\_\_  
Date/Initial

GRANT \_\_\_\_\_  
C of C Meeting Date

FBI/DOJ FINGERPRINT CARDS

REPRINT \_\_\_\_\_

DENY \_\_\_\_\_  
C of C Meeting Date

REJECT \_\_\_\_\_

REPRINT \_\_\_\_\_

REJECT \_\_\_\_\_

REPRINT \_\_\_\_\_

REJECT \_\_\_\_\_

PASTE LABEL HERE

QC-- CC Mailed

**VERIFICATION OF GOOD STANDING  
(CREDENTIALS HELD IN OTHER STATES)**



## CRIMINAL CONVICTION FORM

(To be completed only if you checked "yes" to questions 3 or 10 of the application.)

If you checked "yes" to questions 3 or 10 of the application, you ***must provide*** the documents listed below, and ***fully complete*** the reverse side of this form for each conviction. You may use a photocopy of this form if you have more than one conviction to report.

***The following documentation is required before your file can be reviewed:***

### Conviction of a Crime

1. Certified copy of the complete investigative or arrest report(s) from the arresting law enforcement agency.
2. Certified copy of the court documents showing the charges filed against you, including the criminal complaint or information.
3. Certified copies of the complete court docket showing the plea you entered, sentencing and verification that the conditions of probation were satisfied.

Note: if any of these records have been purged, a statement verifying that fact must be received from the court, or law enforcement agency, on official letterhead.

### Alcohol or Drug Offense

1. All information listed above under "Conviction of a Crime."
2. Certified copies of the certificate(s) of completion for each program attended.
3. Letter from program counselor(s), on official letterhead, verifying successful completion, indicating the type of treatment received, the duration, and the status of your rehabilitation at the time of completion.
4. Printout of Department of Motor Vehicles record.

Note: if any of these records have been purged, a statement verifying that fact must be received from the court, or law enforcement agency, on official letterhead.

### Optional Information

You may also wish to submit acceptable, documented evidence of rehabilitation. Examples of such rehabilitative evidence include:

- recent, dated letter from applicant describing rehabilitative efforts or changes in life to prevent future problems;
- letters on official letterhead from professional counselors, instructors, employers, probation or parole officers;
- letters from recognized recovery programs and/or counselors attesting to current sobriety and length of time of sobriety, if there is a history of alcohol or drug abuse;
- proof of community work, schooling, or other self-improvement efforts;
- certified court order expunging record or certificate of rehabilitation;
- current mental status examination by a clinical psychologist, including psychological testing, if applicable.

## CRIMINAL CONVICTION

(Complete a separate form for each conviction. You may photocopy this form.)

Convicted of: \_\_\_\_\_

Date of offense: \_\_\_\_\_

Name of arresting agency (Police or Sheriff's Office): \_\_\_\_\_

\_\_\_\_\_

Court of Jurisdiction: \_\_\_\_\_

\_\_\_\_\_

Plea and conditions of probation, if any: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Details of the incident: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(You may attach any further explanation of the incident)

I declare under penalty of perjury that the foregoing, including any attachment, is true and correct. I hereby authorize the above listed courts and law enforcement agencies to release any information concerning me to the California Commission on Teacher Credentialing.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Printed name: \_\_\_\_\_